

1644



C014CIP/DIV2/US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : Phillip Gambel  
Group : 1644  
Applicants : Michael J. Yellin et al.  
Application No.: 09/342,314 Confirmation No. 6376  
Filed : June 29, 1999  
For : THERAPEUTIC APPLICATIONS FOR THE ANTI-T-BAM  
(CD40-L) MONOCLONAL ANTIBODY 5C8 IN THE  
TREATMENT OF VASCULITIS

RECEIVED  
DEC 13 2001  
TECHCENTER 1600/2300

New York, New York  
December 4, 2001

Hon. Commissioner for Patents  
Washington, D.C. 20231

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☐ a Preliminary Amendment;  
☐ a Supplemental Amendment to Examiner's Action, including  
Appendix; ☐ a Supplemental Amendment; ☐ a substitute  
Specification; ☐ a Declaration; ☐ a Second Supplemental  
Declaration; ☐ a Power of Attorney; ☐ an Associate Power of  
Attorney; ☐ formal drawings; ☒ a Fourth Supplemental  
Information Disclosure Statement ☒ Form PTO-1449 and cited  
document; ☒ a Check in the amount of \$180.00 for the filing of a  
Fourth Supplemental Information Disclosure Statement to be filed  
in the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS

- ☐ A fee for additional claims is required.  
☒ A fee for additional claims is not required.

[ ] A fee for additional claims is required. The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	-	*	=	x	\$18 = \$
INDEPENDENT CLAIMS	-	**	=	x	\$84 = \$
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM				+	\$280 = \$
* If less than 20, insert 20.				TOTAL \$	.00
** If less than 3, insert 3.					

[ ] A check in the amount of \$ \_\_\_\_\_ in payment of the filing fee is transmitted herewith.

[X] The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

[ ] Please charge \$ \_\_\_\_\_ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

FOURTH SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

[X] A check in the amount of \$180.00 in payment of the fee required pursuant to 37 C.F.R. § 1.17(p) is transmitted herewith.

[ ] The Director is hereby authorized to charge payment of the \$180.00 fee required pursuant to 37 C.F.R. § 1.17(p) to Deposit Account No. 06-1075.

- ☒ The Director is hereby authorized to charge payment of any additional fee required in connection with this Supplemental Information Disclosure Statement to Deposit Account No. 06-1075.

EXTENSION FEE

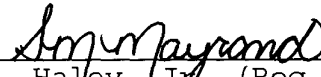
- ☐ The following extension is applicable to the Response filed herewith; ☐ \$110.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); ☐ \$390.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); ☐ \$890.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1,390.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136(a); \$1,890.00 within fifth month pursuant to 37 C.F.R. § 1.136(a).

- ☐ A check in the amount of ☐ \$110.00; ☐ \$400.00; ☐ \$920.00; ☐ \$1,440.00; ☐ \$1,960.00 in payment of the extension fee is transmitted herewith.

- ☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

- ☐ Please charge the ☐ \$110.00; ☐ \$400.00; ☐ \$920.00; ☐ \$1,440.00; ☐ \$1,960.00; extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



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I Hereby Certify that this Correspondence is being Deposited with the U.S. Postal Service as First Class Mail in an Envelope Addressed to:  
COMMISSIONER FOR  
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P.O. Box 2327  
ARLINGTON, Virginia 22202  
ON: December 4, 2001  
Lillian Garcia

  
Signature of Person Signing.